

Wisconsin Medicaid Dental Facts FY 2003

More Medicaid/BadgerCare recipients received dental services in Fiscal Year (FY) 2003.

The number of fee-for-service Medicaid recipients who received dental services increased 12.6% from 115,595 in FY 01 to 130,142 in FY 03 (7/1/02 – 6/30/03). The Medicaid Fee-for-Service caseload increased from 513,603 recipients in FY 01 to 576,495 recipients in FY 03, so the percentage of Medicaid/BadgerCare recipients receiving dental services increased slightly from 22.5% in FY 01 to 22.6% in FY 03.

(see Table 4: Wisconsin Medicaid Measures of Dental Service)

Medicaid expenditures for dental services exceed \$36 million in Fiscal Year (FY) 2003.

In FY 03, total Wisconsin Medicaid/BadgerCare fee-for-service dental payments were \$26.36 million. Health Maintenance Organizations were paid \$9.9 million to provide dental services to Medicaid/BadgerCare recipients in Milwaukee, Waukesha, Racine, and Kenosha counties in FY 03.

(see Table 1: Wisconsin Medicaid Dental Fiscal Data)

Medicaid payments to dentists compared to billed amounts similar to other non-institutional providers.

Wisconsin Medicaid paid dentists 47.5%, of usual and customary charges submitted to Medicaid for dental services in FY 03. This paid-to-billed ratio for dentists is consistent with the paid-to-billed ratios of other non-institutional providers.

(see Table 2: Wisconsin Medicaid-Certified Non-Institutional Providers Percent Paid-to-Billed)

The number of licensed dentists in Wisconsin who were Medicaid Certified increased.

According to the Department of Regulation and Licensing, in July 2003, 3,464 dentists were licensed to practice dentistry in Wisconsin. The number of Medicaid-certified dentists in Wisconsin increased slightly, from 1,938 in FY 01, or 56.2% of licensed dentists to 1,944 in FY 03, or 56.1% of licensed dentists.

(see Table 4: Wisconsin Medicaid Measures of Dental Service)

Slightly fewer Wisconsin dentists billed for services to Medicaid patients.

The number of Medicaid-certified dentists submitting Medicaid claims has decreased slightly from 1,394 dentists, or 40.5% of Wisconsin licensed dentists in FY01 to 1377, or 39.8%, of Wisconsin licensed dentists, in FY 03.

(see Table 4: Wisconsin Medicaid Measures of Dental Service)

The number of Wisconsin dentists submitting a very high volume of claims increased in Fiscal Year (FY) 2003.

The number of Medicaid-certified dentists submitting a very large number of Medicaid claims has increased from FY 01 to FY 03. The number of dentists submitting 1,000 to 1,999 claims increased from 31 to 49, a 58.1% increase, and the number submitting over 2,000 claims increased from 8 to 15, an 87.5% increase.

(see Table 5: Volume of Claims Submitted by Wisconsin Medicaid-Certified Dentists)

Special dental claims-handling processes continued through Fiscal Year (FY) 2003.

A unit of dental specialists, at Wisconsin Medicaid's fiscal agent, expedited claims, prior authorization requests, and certification for dentists. Common paperwork errors were corrected, to the extent possible, with a phone call to the dentists. As a result of fiscal constraints, Wisconsin Medicaid had to discontinue these procedures in August 2003, at the beginning of FY 04. Wisconsin Medicaid's fiscal agent maintains a pool of provider customer service telephone correspondents to assist dental providers with billing problems.

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Table 1: Wisconsin Medicaid Fee-for-Service Dental Fiscal Data¹

	Expenditures	Billed	Percent Paid-to-Billed
FY 03 (July 1, 2002 – June 30, 2003)	\$26,362,022	\$55,465,677	47.5%
FY 02 (July 1, 2001 – June 30, 2002)	\$23,738,235	\$47,887,488	49.6%
FY 01 (July 1, 2000 – June 30, 2001)	\$21,609,764	\$41,592,918	52%
FY 00 (July 1, 1999 – June 30, 2000)	\$19,658,785	\$35,812,744	54.9%
FY 99 (July 1, 1998 – June 30, 1999)	\$14,885,635	\$28,029,400	53.1%
FY 98 (July 1, 1997 – June 30, 1998)	\$14,719,000	\$27,604,200	53.3%
FY 97 (July 1, 1996 – June 30, 1997)	\$14,949,100	\$27,299,100	54.8%
FY 96 (July 1, 1995 – June 30, 1996)	\$16,108,600	\$28,374,000	56.8%
FY 95 (July 1, 1994 – June 30, 1995)	\$18,591,700	\$36,159,600	51.4%
FY 94 (July 1, 1993 – June 30, 1994)	\$18,767,900	\$30,524,700	61.5%
FY 93 (July 1, 1992 – June 30, 1993)	\$17,252,300	\$28,192,800	61.2%

¹ HMGR 340Q – June 2003, June 2002, June 2001, June 2000, June 1999, June 1998, June 1997, June 1996, June 1995, June 1994 and June 1993. This figure does not include capitation payments made to HMOs providing dental services in Milwaukee, Waukesha, Racine, and Kenosha counties.

**Table 2: Wisconsin Medicaid-Certified Non-Institutional Providers
Percent Paid-to-Billed²**

Provider Type	FY 01 7/1/00 – 6/30/01	FY 02 7/1/01-6/30/02	FY 03 7/1/02 – 6/30/03
Audiologists	56.7%	50%	56.5%
Optometrists	55.9%	53%	52.1%
Dentists	52%	49.6%	47.5%
Nurse Practitioners	37.9%	41.6%	44.1%
Podiatrists	43.5%	39.7%	40.1%
Mental Health/AODA Clinics	43%	41.6%	41.9%
Physician Services	31.8%	30.5%	29.8%
Chiropractors	23.7%	31.9%	41.1%

² HMGR 340Q – June 2003, June 2002, and June 2001.

Note: The paid-to-billed ratio may vary due to the influence of other insurance and recipient co-payments. Supplemental health insurance and Medicare coverage for physician services is widely available. Due to the minimal influence of commercial dental insurance on the amount of Wisconsin Medicaid reimbursement, the paid-to-billed ratio for dentists is more accurate than the paid-to-billed ratio for physician services.

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Table 3: Wisconsin Medicaid Dental Rate History

Rate increases are enacted through the Wisconsin Biennial Budget, approved by the Governor and the State Legislature.

FY 04 (effective 7/1/03)	No rate increase
FY 03 (effective 7/1/02)	1.099% rate increase
FY 02 (effective 7/1/01)	1.065% rate increase
FY 01 (effective 7/1/00)	No rate increase
FY 00 (effective 7/1/99)	Increased Medicaid maximum allowable fees for adults to 65% of usual and customary charges billed in calendar year 1998 and for children to 69% of usual and customary charges billed in calendar year 1998.
FY 99 (effective 7/1/98)	Increased Medicaid maximum allowable fees for adults and children by 5%
FY 98 (effective 7/1/97)	Increased Medicaid maximum allowable fees for adults and children by 5%
FY 97 (effective 7/1/96)	No rate increase
FY 96 (effective 7/1/95)	Increased Medicaid maximum allowable fees for children's dental procedures to 75% of CY 94 charges
FY 95 (effective 7/1/94)	No rate increase
FY 94 (effective 7/1/93)	Increased 24 children's dental procedures by \$3.50 (6.2% increase)
FY 93 (effective 7/1/92)	Increased Medicaid maximum allowable fees for adults and children to 67% of CY91 charges billed
FY 92 (effective 7/1/91)	Increased Medicaid maximum allowable fees for adults and children to 63% of CY91 charges billed

Note: In FY 92, FY93, FY94, and FY96, most non-institutional provider groups did not receive a rate increase. In FY95, most non-institutional providers received a 1% rate increase. In both FY97 and FY 98, most non-institutional providers received a 2% rate increase. In FY 00 no other non-institutional providers received rate increases, except personal care providers. In FY 01, most other non-institutional providers received a 1% rate increase.

Table 4: Wisconsin Medicaid Measures of Dental Service

	FY 01 7/1/00-6/30/01	FY 03 7/1/02 – 6/30/03	% Change
Wisconsin Licensed Dentists [^]	3,446	3464	0.5%
Medicaid Dental Providers:			
Medicaid-Certified Dentists [#]	1938	1944	0.3%
Percent of Licensed Dentists who are Medicaid Certified	56.2%	56.1%	-0.2%
Medicaid-Certified Dentists Submitting Claims-	1394	1377	-1.2%
% of Medicaid-Certified Dentists Submitting Claims	71.9%	70.8%	-1.5%
% of Licensed Dentists Submitting Medicaid Claims	40.5%	39.8%	-1.7%
Medicaid Recipients:			
Unduplicated Fee-for-Service Medicaid Recipients in Wisconsin ⁺	513,603	576,495	12.2%
Unduplicated Medicaid Recipients Receiving Fee-for-Service Dental Services	115,595	130,142	12.6%
% of Medicaid Fee-for-Service Eligible Receiving Dental Services	22.5%	22.6%	0.3%
Fee-for-Service Eligible Recipients per Certified Dentist Submitting Claims	368	419	13.6%
Procedures:			
Total Number of Procedures Rendered	573,262	679,654	18.6%
Average # of Procedures per Dentist Submitting Claims	411	494	20%

[^] Individual dentists who are licensed by the Department of Regulation and Licensing, and in active practice in Wisconsin (as of (07/17/01) and (7/1/03).

[#] Medicaid Certified Dentists in Wisconsin = Total billing providers enrolled (HMGR 340Q report)- #enrolled out of state (HMGR 338Q report)-# of clinics enrolled (HMGR 339Q report)

- Wisconsin Dentists who have submitted at least one dental claim based on performing provider statistics.

⁺ Unduplicated Fee for Service Medicaid Recipients in Wisconsin = Unduplicated Total of Medicaid Recipients - HMO/Dental Enrollees

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Table 5: Volume of Claims Submitted by Wisconsin Medicaid-Certified Dentists*

Volume of Claims	FY00		FY01		FY03	
	Number of Medicaid-Certified Dentists	Percent of Medicaid-Certified Dentists	Number of Medicaid-Certified Dentists	Percent of Medicaid-Certified Dentists	Number of Medicaid-Certified Dentists	Percent of Medicaid-Certified Dentists
1-49	653	45.3%	601	42.7%	548	39.8%
50-99	251	17.4%	231	16.4%	215	15.6%
100-249	292	20.3%	295	21%	301	21.9%
250-499	135	9.4%	153	10.9%	162	11.8%
500-749	53	3.7%	56	4%	55	4%
750-999	22	1.5%	31	2.2%	32	2.3%
1,000-1,999	30	2.1%	31	2.2%	49	3.6%
2,000 or more	2	0.3%	8	0.6%	15	1.1%

* Claims submitted by Wisconsin dentists, based on performing provider identification statistics.

In FY 00, 54.7% of participating Medicaid-certified dentists submitted 50 or more Medicaid claims.

In FY 01, 57.3% of participating Medicaid-certified dentists submitted 50 or more Medicaid claims.

In FY 03, 60.2% of participating Medicaid-certified dentists submitted 50 or more Medicaid claims.